| Complete and se | nd this form, toget | | B - FEE(S) TRANS | MITTAL ail Stop ISSUE FEE | · | |
|---|--|---|---|---|--|---|
| JUN 1 1 2007 | | | | Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885 | | |
| INSTRUCTIONS: This appropriate All further indicated unless to the maintenance fee notifica | should be used by respondence including a below or directed of tions. | for transmitting the ISSU ng the Patent, advance o herwise in Block 1, by (a | , | • | Blocks 1 through 5 s mailed to the current r (b) indicating a sep | should be completed where correspondence address as arate "FEE ADDRESS" for |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | |
| | Y LLP OF THE AMERIC | I h Sta add trai | Certificate creby certify that this Feet tes Postal Service with suitessed to the Mail Stop asmitted to the USPTO (57 | e of Mailing or Trans (s) Transmittal is bein, fficient postage for fir ISSUE FEE address (1) 273-2885, on the co | g deposited with the United st class mail in an envelope above, or being facsimile date indicated below. | |
| NEW YORK NY 10036-8704 06/12/2007 RMEBRAH1 00000054 061075 10717137 | | | | Isatta B. Smith (Depositor's name) | | |
| 01 FC:1501 1400-00 DA 02 FC:1504 300-00 DA | | | | | 263 | (Signature) |
| 03 FC:8001 1 | 2.00 DA | | | June | 8,2007 | (Date) |
| APPLICATION NO. | 11/18/2003 | | FIRST NAMED INVENTO | ATTO | RNEY DOCKET NO. | CONFIRMATION NO. |
| 10/717,137 TITLE OF INVENTION | | MPOSITIONS FOR TRE | Ling Yuk Cheung ATING EPILEPSY | | KONG-29 21 | 7246 |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | ИО | \$1400 | \$300 | \$0 | \$1700 | 08/21/2007 |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS | 7 | | |
| WINSTON, RANDALL O 1655 | | 1655 | 435-173100 | | | |
| | ondence address (or Cha 3/122) attached. | n of "Fee Address" (37 inge of Correspondence " Indication form led. Use of a Customer | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME A | ND RESIDENCE DATA | A TO BE PRINTED ON 1 | I THE PATENT (print or ty | pe) | | |
| PLEASE NOTE: Universely 10 PLEASE NOTE: Universely 10 PLEASE (A) NAME OF ASSIC | | ified below, no assignce bletion of this form is NO | | natent. If an assignee is ic assignment. If and STATE OR COUNT | | ocument has been filed for |
| Ultra Bio | otech Limit | ed | Douglas, | Isle of Man | | |
| Please check the appropri | ate assignee category or | categories (will not be pr | rinted on the patent): | Individual Excorporati | ion or other private gro | oup entity Government |
| 4a. The following fee(s) are submitted: Solution See Submitted: A check is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies 4 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Order No. 003929.00 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1075 (enclose an extra copy of this form). | | | | | | |
| | SMALL ENTITY statu | is. See 37 CFR 1.27. | ☐ b. Applicant is no lor | ger claiming SMALL EN | ΓΙΤΥ status. See 37 Cl | FR 1.27(g)(2). |
| interest as shown by the r | ecords of the United Sta | tes Patent and Trademark | Office. | nic applicant; a registered a | attorney or agent; or th | ne assignee or other party in |
| Authorized Signature | 11 | Lupha | <u>~</u> | | 3, 2007 | |
| Typed or printed name Z. Ying Li | | | Registration No. 42,800 | | | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.